



TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/825,801	
	Filing Date	1 April 2004	
	First Named Inventor	Gerald W. Iseler	
	Art Unit	1765	
	Examiner Name	M. Song	
Total Number of Pages in this Submission	8+1	Attorney Docket Number	AFB00698

ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Technology Center	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Petition for Extension of Time Under 37 CFR 1.136(a)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input checked="" type="checkbox"/> Amendment / Reply	Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter	
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Landscape Table on CD		
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks		
<input type="checkbox"/> Response to Missing Parts / Incomplete Application			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm Name			
Signature			
Printed Name	THOMAS C. STOVER		
Date	9 August 2006	Reg. No.	31,320

CERTIFICATE OF TRANSMISSION/ MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	THOMAS C. STOVER	Date	9 August 2006

Effective 10/08/2004 Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818)		Complete if Known Application Number: 10/825,801 Filing Date: 1 April 2004 First Named Inventor: Gerald W. Iseler et al Examiner Name: M. Song Art Unit: 1765					
FEE TRANSMITTAL For FY 2006							
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket Number: AFB00698					
TOTAL AMOUNT OF PAYMENT: \$120.00							
METHOD OF PAYMENT (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: AF 01-0465 Deposit Account Name: Dept of the Air Force For the above-identified deposit account, the Director is hereby authorized to: (Check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or Underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
Fee Description	Small Entity Fee (\$)						
Each claim over 20 (including Reissues)	50						
Each independent claim over 3 (including Reissues)	200						
Multiple dependent claims	360						
Total Claims	Extra Claims	Fee(\$)	Fee Paid (\$)	Multiple Dependent Claims Fee (\$)	Fee Paid (\$)		
-20 or HP =	x	=					
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	- 3 or HP =	x	=	
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 =	/50	(round up to a whole number) x	=				
	Fees Paid (\$)						
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g. late filing surcharge): Extension of Time	\$120.00						
Signature: Julian L. Siegel	Registration No. (Attorney/Agent) 22,407	Telephone (781) 377-4074					
Name (Print/Type): JULIAN L. SIEGEL	Date: 12 July 2004	Date: 9 Aug. '06					